Application Data Sheet

APPLICATION INFORMATION

Application Type:: Regular

Subject Matter:: Utility

Title:: HIGH RECOVERY SONIC GAS VALVE

Attorney Docket Number:: 502724

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 3

Total Drawing Sheets:: 8

Small Entity?:: No

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.

Status:: Full Capacity

Given Name:: Barry

Middle Name:: T.

Family Name:: Brinks

Name Suffix::

City of Residence:: Fort Collins

State or Prov. of Residence:: CO

Country of Residence:: U.S.

Street of mailing address:: 2700 Virginia Dale Drive

City of mailing address:: Fort Collins

State or Province of mailing address:: CO

Country of mailing address:: U.S.

Postal or Zip Code of mailing address:: 80521

Inventor Authority Type:: Inventor

Primary Citizenship Country:: U.S.

Status:: Full Capacity

Given Name:: Jeff

Middle Name:: A.

Family Name:: Gessaman

Name Suffix::

City of Residence:: Fort Collins

State or Prov. of Residence:: CO

Country of Residence:: U.S.

Street of mailing address:: 2403 Sunburst Drive

City of mailing address:: Fort Collins

State or Province of mailing address:: CO

Country of mailing address:: U.S.

Postal or Zip Code of mailing address:: 80521

Inventor Authority Type:: Inventor

Primary Citizenship Country:: U.S.

Status:: Full Capacity

Given Name:: Barry

Middle Name::

Family Name:: Suelter

Name Suffix::

City of Residence:: Fort Collins

State or Prov. of Residence:: CO

Country of Residence:: U.S.

Street of mailing address:: 5151 Boardwalk Drive

Unit Q2

City of mailing address:: Fort Collins

State or Province of mailing address:: CO

Country of mailing address:: U.S.

Postal or Zip Code of mailing address:: 80525

Page 2 Initial 03/09/04

CORRESPONDENCE INFORMATION

Correspondence Customer Number::

Phone:: (815) 963-7661

Fax:: (815) 963-7664

E-mail Address:: rockmail@leydig.com

23626

REPRESENTATIVE INFORMATION

Representative Customer Number:: 23626

ASSIGNEE INFORMATION

Assignee name:: Woodward Governor Co.

Street of mailing address:: 1000 E. Drake Road

P.O. Box 1519

City of mailing address:: Fort Collins

State or Province of

mailing address:: Colorado

Country of mailing

address:: U.S.

Postal or Zip Code of

mailing address:: 80525